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	OF SIGNER (T	ype or print)			16A	NAME	AND TITLE OF		TRACTING C		(Type or print)
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15B. CONTRACTOR/OF	FEROR are of person			15C. DATE	SIGNED 16B	. UNITE	D STATES OF A	20	ontracting Off	-	16C. DATE SIGNED

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STANDARD FORM 30 (REV. 10-83) Prescribed by GSA FAR (48 CFR) 53.243 Amendment No. 004 RFP No. 080015

This Amendment No. 004 is issued to the above referenced RFP Number in order to:

Incorporate Exhibit 1 and Exhibit 2 into the RFP. Exhibit 1 is incorporated as Attachment 10 of the solicitation. Exhibit 2 is incorporated as Attachment 11 of the solicitation. These documents are referenced under Article 2. Instructions for Preparing the Technical Proposal – Source Selection Procedures – Construction. Exhibit 1 shall be used by offerors to list proposed Key Personnel. Exhibit 2 shall be used by offerors to list proposed Subcontractors.

Attachments:

Exhibit 1 (1 page) Exhibit 2 (1 page)

EXHIBIT 1

KEY PERSONNEL RESUME

This resume is pertinent to the experience and professional background of contractor's or supervisory personnel. A Key Personnel Resume must be completed for the On-Site Project Superintendent and Project Manager. Offerors may provide Key Personnel Resumes in a format other than shown below. However, all resumes submitted shall include the information shown below and as required under Article 2, para (3) Factor 3 - Key Personnel.

RFP No. 080015		-1-	Exhibit 1
BRIEF STATEMENT O THIS CONTRACT.	F WHY THIS SUPE	KVISOR IS BELIEVED	TO BE QUALIFIED FOR
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Date From-To	Job Title	Co Address	Telephone Number
			Immed. Supervisor
WORK EXPERIENCE (PAST 5 YEARS IN	CHRONOLOGICAL OR	DER):
DESCRIPTION AND SO	COPE OF CURREN	Г ЈОВ:	
RESPONSIBLE FOR TH	HE WORK OF	_PERSONS	
TIME IN CURRENT PO	SITION (YEARS, N	MONTHS)	
CURRENT POSITION V			
EMPLOYEE'S NAME_	sandi maraka maraka maraka		
PROPOSED POSITION	TITLE	····	

EXHIBIT 2

SUBCONTRACTORS

1. Company Name: Address:		
Point of Contact: Telephone: Fax: e-mail:		
2. Company Name: Address:		
Point of Contact: Telephone: Fax: e-mail:	-	
3. Company Name: Address:		-
Point of Contact: Telephone: Fax: e-mail:		tional shoots if possessor.

(Use additional sheets if necessary)